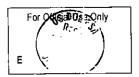
U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

# FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



## READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - /3077		2. Fisca	l Year Covered From:	
,			1 / 1 / 2	004 Through: 12 / 31 / 2004
3. Name and address of person filing.		4. Nam	e, file number, and edo	dress of labor organization.
Name John Scar	f. i.	, Name	District #15	IAM
		Labo	r Organization File Mur	mber 007-879
P.O. Box, Bldg., Room No., if any Apt H30	D2	P.O.	Box, Building and Roo	om Number, if any 802
Street 5724 Deauville Circle	-	Stree	<sup>et</sup> 55 Washingcor	ı Street
City Naples		City	Brooklyn	
State Florida , 2	ZIP Code + 4 34112	State	New York	ZIP Code + 4 ,11201
5. Position in lator organization. Secretar	y Treasurer (reti	red)	na.	-
	past fiscal year, you or you	ur spouse or m	inor child directly or in t forth in the instruction	directly had any of the following interests
Enter appropriate data below If, during the  A. Held an interest in, engaged in transacti	ons (including loans) wit	th, or derived	income or other eco	nomic benefit of
A. Held an interest in, engaged in transacti monetary value from an employer whose	ons (including loans) wit employees your orga	th, or derived nization repr	income or other eco	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transacti monetary value from an employer whose     6. Name and address of Employer (including transaction).	ons (including loans) wit employees your orga	th, or derived nization repr	income or other ecolesents or is actively	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transacti monetary value from an employer whose  6. Name and address of Employer (including transaction)  Name	ons (including loans) wit employees your orga	th, or derived nization repr	income or other ecolesents or is actively	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transacti monetary value from an employer whose     6. Name and address of Employer (including transaction).	ons (including loans) wit employees your orga	th, or derived nization repr	income or other ecolesents or is actively	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transacti monetary value from an employer whose  6. Name and address of Employer (including transaction)  Name	ons (including loans) wit employees your orga	th, or derived nization repr 7.a. N	income or other econesents or is actively ature of Interest, Transi	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transacti monetary value from an employer whose 6. Name and address of Employer (including transaction)  Name  Trade Name, if any:	ons (including loans) wit employees your orga	th, or derived nization repr 7.a. N	income or other ecolesents or is actively	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transactimonetary value from an employer whose 6. Name and address of Employer (including transaction) Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street	ons (including loans) wit employees your orga	th, or derived nization repr 7.a. N	income or other econesents or is actively ature of Interest, Transi	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transaction monetary value from an employer whose  6. Name and address of Employer (including transaction)  Name  Trade Name, if any:  P.O. Box, Bldg, Room No., if any	ons (including loans) wit employees your orga	th, or derived nization repr 7.a. N	income or other econesents or is actively ature of Interest, Transi	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transaction monetary value from an employer whose  6. Name and address of Employer (including transaction)  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City	ons (including loans) wit employees your orga	th, or derived nization repr 7.a. N	income or other econesents or is actively ature of Interest, Transi	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transaction monetary value from an employer whose  6. Name and address of Employer (including transaction)  Name  Trade Name, if any:  P.O. Box, Bldg, Room No., if any  Street  City	ons (including loans) with employees your organised name, if any).	th, or derived nization repr 7.a. N	income or other econesents or is actively ature of Interest, Transi	nomic benefit of seeking to represent.
A. Held an interest in, engaged in transactimonetary value from an employer whose 6. Name and address of Employer (including transaction) Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State	ons (including loans) with employees your organists and name, if any).  ZIP Code + 4  signed declares, under penaltion contained in any accordance.	th, or derived nization repr  7.a. N.  7.b. A  Signature  alty of Perjury mpanying documents	income or other ecolesents or is actively ature of Interest, Transiture of Int	nomic benefit of seeking to represent.  action, or Income.  enalties of the law, that all of the information mined by the signatory and is, to the best of the
A. Held an interest in, engaged in transactimonetary value from an employer whose  6. Name and address of Employer (including transaction) Name  Trade Name, if any:  P.O. Box, Bldg, Room No., if any  Street  City  State  15. Signature and verification. The undersauthmitted in this report (including the information)	ons (including loans) with employees your organists and name, if any).  ZIP Code + 4  signed declares, under penaltion contained in any accordance.	th, or derived nization repr  7.a. N.  7.b. A  Signature  alty of Perjury mpanying documents	income or other ecolesents or is actively ature of Interest, Transiture of Int	nomic benefit of seeking to represent.  action, or Income.  enalties of the law, that all of the information mined by the signatory and is, to the best of the

Name of Person Filing John Scarfi	File Number <b>U</b> -	
B. Held an interest in or derived income or economic benefit with monetary substantial part of which consists of buying from selling or leasing to, or of of an employer whose employees your labor organization represents or is a (2) any part of which consists of buying from or selling or leasing directly or dealing with your labor organization or with a trust in which your labor organization.	herwise dealing with the business actively seeking to represent, of rindirectly to, or otherwise	
8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name District 15 Health Fund	X a. Labor Organization	
Trade Name, i' any:	b. Trust	
P.O. Box, Bldg., Room No., if any	c. Employer	
Street 2185 Lemoine Ave.		
City Fort Lee		
State New Cersey ZIP Code + 4 07024		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name	Trustee meeting	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if апу		
Street	11.b. Approximate dollar value of such dealing.	\$30
City	12.a. Nature of interest he d or income received.	
State ZIP Code + 4	<b>(</b>	
	12.b. Amount.	
C. Received from any employer (other than an employer covered or from any labor relations consultant to an employer any payment of mo	under parts A and B above) oney or other thing of va ue.	
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.	
Name		
Trade Name, if any:		
P.O. Box, Bldg. Room No., if any		
Street	,	
City		
State ZIP Code + 4		
13.b is the Bus ness an Employer or Consultant ?	14.b. Amount of payment.	

ame of Person Filing John Scarfi	File Number U-
----------------------------------	----------------

#### Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:
Name Local Lodge 447 Fringe Benefit Trust Fund	✓ a. Labor Organization
Trade Name, fany:	~
P.O. Box, Bldy., Room No., if any	' b. Trust
Street 1300 Connecticut Ave.	c. Employer
City Washington	
State District of Columbia ZIP Code + 4 20036	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	
Trade Name, fany:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$30
	12.a. Nature of interest held or income received.
	12 h Amount
	12.b. Amount.

Jame	οf	Person	Filina	Tobo	Scarfi
varrie	U.	rei sui i	FRIII	JOUD	Scarii

File Number U-

### Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Machinists Money Purchase Pension Fund	x a. Labor Organization
Trade Name, if any:	<b>/</b> \.
P.O. Box, Bldg., Room No., if any	b. Trust
Street 2185 Lemoine Ave.	c. Employer
City Fort Lee	
State New Jersey ZIP Code + 4 07024	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	
Trade Name, fany:	
P.O. Box, Bldg., Room No , if any	
Street	
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$30
	12.a. Nature of interest held or income received.
	12.b. Amount.

Vame	of Person	Filina	John	Scarfi
AGILIE.	O1 F C13011	10111154	LIOIIII	SCALLI

File Number U-

#### Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or o herwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:
Name LL 447 Severance Bonus Trust Fund	a. Labor Organization
Trade Name, if any:	b. Trust
P.O. Box, Bldg., Room No., if any	
Street 1300 Connecticut Ave., NW	c. Employer
City Washington	
State New Jersey ZIP Code + 4 20036	
10. If 9.b. or 9.c. is checked give trust or employer's name	11.a. Nature of such dealing.
Name	1
Trade Name, fany:	
P.O. Box, Bldg., Room No., if any	
Street	1
City	
State ZIP Code + 4	11.b. Approximate dollar value of such dealing. \$30
	12.a. Nature of interest held or income received.
	\text{\tint{\text{\tin}\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex
	12.b. Amount.